01/26/2004 01 FC:2253 PTO/SB/22 (10-00) Approved for use through 10/31/2002. OMB 0651-0031

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|---|--|--|-----------------|--------------------------|--------|--|
| PETITION FOR EXTENSION OF | TIME UNDER 3 | 7 CFR 1.136(a) | Docket 2127 | Number (Optional) | 2 | |
| | In re Application of | Boris Gelfand | | | | |
| | Application Number 09/896,858 | | | Filed 06/29/001 | | |
| | For Data Cells, a | and a System and Me | thod for A | Accessing Data i | n a | |
| | Group Art Unit 217 | 1 | Examine | Cindy Nguyen | | |
| This is a request under the provisions of reply in the above identified application. | 37 CFR 1.136(a) to | extend the period fo | r filing a | | | |
| The requested extension and appropriate (check time period desired): | e non-small-entity fe | | | | | |
| One month (37 CFR 1.17(a) | (1)) | RECEIV | ED | \$ | | |
| Two months (37 CFR 1.17(a)(2)) | | JAN 2 8 2004 | | \$ \$ 950.00 | | |
| Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) | | Technology Center 2100 \$ | | | | |
| Five months (37 CFR 1.17(a | • | | \$ | | | |
| Applicant claims small entity status above is reduced by one-half, and A check in the amount of the fee is | the resulting fee is: | | amount sl | hown | | |
| Payment by credit card. Form PTC | | | | | | |
| The Commissioner has already be application to a Deposit Account. | een authorized to cr | large rees in triis | | | | |
| The Commissioner is hereby author or credit any overpayment, to Dep | | • | required, | | | |
| I have enclosed a duplicate copy of | | el <u>500-240</u> | | • | | |
| I am the applicant/inventor | | | | | | |
| assignee of record of th Statement under 37 | e entire interest. Se ' CFR 3.73(b) is en | ee 37 CFR 3.71. closed. (Form PTO/S | B/96). | | | |
| attorney or agent of record. | | | | | | |
| attorney or agent under Registration number if a | r 37 CFR 1.34(a). cting under 37 CFR 1.3 | 4(a) 35,726 | | | | |
| WARNING: Information on this for be included on this form. Provide | | | | | | |
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| January 19, 200- | | Signa | 1 tura | <u></u> | _ | |
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| 475.00 OP | | Daniel A. Tysver Typed | d or printe | ed name | | |
| NOTE: Signatures of all the inventors or assignees forms if more than one signature is required, see b | | nterest or their representa | tive(s) are r | equired. Submit multi | iple | |
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